

Form MR-SMO (Revised June 25, 2004)

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This Section for DOGM Use: Assigned DOGM File No.	S 10/31 009
DOGM Lead: PBB	3
Permit Fee \$ 150 00	Ck # 1051

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING

1594 West North Temple Suite 1210 Box 145801

Salt Lake City, Utah 84114-5801 Telephone: (801) 538-5291 Fax: (801) 359-3940

NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1987, and the General Rules as promulgated under the Utah Minerals Regulatory Program.

"Small Mining Operations" means mining operations which disturb five or less surface acres at any given time.

 Name of Mine: LaVon Giles Pit
Name of Person or Entity Applying for Permit: W.W. Clyde/Obayashi, JV Address: HC 65 Box 119
City State, Zip: Altamont, Utah, 84007
Phone: 435-454-4644 Fax: 435-454-4648
E-mail Address:
Company () Corporation () Partnership (x) Individual () Other () – specify type)
A corporation must be registered with the State of Utah, Division of Corporations. Are you currently registered to do business in the State of Utah? [X] Yes [] No
Business License # 5411741-5551 (Contractor's License)
Registered Agent (as identified on business license): David Hales
Address: 1375 North Main St. PO Box 350
City, State, Zip: Springville, Utah, 84663
0.191 0.10.101 - 10
Phone: 801-802-6800 Fax: 801-802-6830
Phone: 801-802-6800 Fax: 801-802-6830 Fax: 801-802-6830
E-mail Address: dhales@wwclyde.net Name of Operator (if different from #2)Clark Prothero / W.W. Clyde/Obayashi, JV Address: _P.O. Box 350
E-mail Address: dhales@wwclyde.net Name of Operator (if different from #2) Clark Prothero / W.W. Clyde/Obayashi, JV Address: P.O. Box 350 City, State, Zip: Springville, Utah, 84663
E-mail Address: dhales@wwclyde.net Name of Operator (if different from #2)Clark Prothero / W.W. Clyde/Obayashi, JV Address: _P.O. Box 350

FEB 2 5 2005

City, State, Zip: Springvill Phone: 801-802-6800 E-mail Address:		Fax: <u>801-80</u>	02-6830
Name of 2 nd owner / Pai			
Address: 5000 Shoreline		orporation	
City, State, Zip: South Sa	n Francisco	94080	
Phone: 650-952-4910	7	Fax.	650-438-6294
E-mail Address:	<i>-</i>	T ux	000 100 020 1
If Corporation or Limite	ed Liability Entity:		
Name of Officers:		Ti	itle:
		T	itle:
		Ti	itle:
		Ti	itle:
01 01 7			
Address: City, State, Zip: Phone:		Fax:	
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discharged as part of the mining or milling process? Yes [] No [x] If yes, please describe (add extra pages if needed)
Provide a brief description of the proposed mining operation and onsite proces acilities (add extra pages if necessary)Borrow material will be excavated we excavator loading into highway legal trucks.
[] New Road(s): Length(ft) Width(ft)
[] New Road(s): Length(ft) Width(ft) [] Improved Road(s): Length(ft) Width(ft)

IV. OPERATION AND RECLAMATION PRACTICES (Rule R647-3-107, 108 & 109)

The reclamation and operation obligation is to keep the area clean and safe, minimize hazards to public safety, return the land to a useful condition, and reestablish at least 70 percent of the premining vegetative ground cover. To accomplish this, the Permittee / Operator will need to perform reclamation concurrently, or at the completion (within one (1) year) of mining:

- 1. Keep the mining operation in a safe, clean, and environmentally stable condition.
- 2. Permanently seal all shafts and tunnels to prevent unauthorized or accidental entry.
- 3. Plug drill holes with a five foot cement surface plug. Holes that encounter fluids are to be plugged in the subsurface to prevent aquifer contamination.
- 4. Construct berms, fences, or barriers, when needed, above highwalls and excavations.
- 5. Remove, isolate, or neutralize all toxic materials in a manner compatible with federal and state regulations.
- 6. Remove all waste or debris from stream channels.
- 7. Dispose of any trash, scrap metal, wood, machinery, and buildings.
- 8. Conduct mining activities so as to minimize erosion and control sediment.
- 9. Reclaim all roads that are not part of a permanent transportation system.

- 10. Stockpile topsoil and suitable overburden prior to mining.
- 11. Stabilize highwalls by backfilling or rounding to 45 degrees or less, where feasible; reshape the land to near its original contour, and redistribute the topsoil and suitable overburden.
- 12. Properly prepare seedbed to a depth of six inches by pocking, ripping, discing, or harrowing. Leave the surface rough.
- 13. Reseed disturbed areas with adaptable species. (The Division recommends a mixture of species of grass, forb, and browse seed, and will provide a specific species list if requested.)
- 14. Plant the seed with a rangeland or farm drill, or broadcast the seed. Fall is the preferred time to seed.

Any variance requ	EREQUEST (Rule R647-3-110) est must be approved in writing by the Division
Requirements, o	No G viations from Rules R647-3-107, Operation Practices, R647-3-108, Hole Plugging or R647-3-109, Reclamation Practices, as summarized above, should be identified below given for the variance request(s).
Item Number	Variance Request Justification
13	Little natural vegetation existing, soil has high salt content
The surety must in The Utah I mining oper reclaimed amount is on data from conditions \$5,000 for	the 1 st acre; and
\$3,000 for	each additional acre.
identify which type o [] Certificate of De [] Other	surety may include: certificates of deposit, letters of credit, surety bonds & cash. Please f surety you will post so we can provide you with the appropriate forms. eposit [] Letter of Credit [] Surety Bond [] Cash (please identify) nat the State Treasurer's office may require additional monies to administer cash sureties).
Check if applicable: [x] Reclamation s	surety is already posted with another regulatory agency (copy must be included as proof):

VII. PERMIT FEE [Mined Land Reclamation Act 40-8-7(1)(i)]

(amount)

10.000

The Utah Mined Land Reclamation Act of 1975 [40-8-7(1)(i)] provides the authority for the assessment of permitting fees. Commencing with the 1998 fiscal year (July 1 - June 30), permit fees are assessed to <u>new</u> and <u>existing</u> notices of intention, and annually thereafter, until the project disturbances are successfully reclaimed by the Permittee / Operator and released by the Division.

Duchesne County

(Agency name)

Small Mine Notices require a \$150.00 fee which must accompany this application or it cannot be processed by the Division.

NOTICE: The following person(s) are authorized and designated to receive Notices of Violations, Cessation Orders and all other Notices required by the Division to be given to the permittee or operator:

Name: <u>David Hales</u> Address: <u>P.O. Box 350</u>			
City, State, Zip: Springville, Utah, 84663			
Phone: (801) 802-6800	Fax:	(801) 802-6800	
E-mail Address: dhales@wwclyde.net			
Name: Clark Prothero			
Address: P.O. Box 350			
City, State, Zip: Springville, Utah, 84663	12.a		
Phone: (801) 802-6800	Fax:	(801) 802-6830	
E-mail Address: cprothero@wwclyde.net			
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VIII. SIGNATURE REQUIREMENT

I hereby verify that the foregoing information is true and accurate and commit to the reclamation of the aforementioned small mining project as required by the Utah Mined Land Reclamation Act (40-8) and the rules as specified by the Board of Oil, Gas and Mining.

cop por [9	I have enclosed the required permit fee.
col son [4	I have also enclosed the appropriate reclamation surety amount or have made
	arrangements as to when the surety will be furnished.
col And []	I understand that I am not authorized to create any surface disturbance until the surety
	amount is posted and approved in writing from the Division of Oil, Gas and Mining and any other authorized regulatory agency.
	te: If a company or corporation, this form must be signed by the owner or cer who is authorized to bind the company/corporation to this Notice.) of Permittee/ Operator/ Applicant: David M/Jules (Land D. bottom) ped or printed):Clark Prothero
Signature	of Permittee/ Operator/ Applicant/\(\sum_{total control of the control o
Name (typ	ped or printed):Clark Prothero
Title/Posit	ion (if applicable): Project Manager
Date:	02/22/2005

(Please check the box and place your initials on the line provided)

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